## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

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Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

appropriate All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, hy (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) Fee(s) Transmittal. This certificate cannot be used for any other accompanying 7590 12/14/2006 papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Matthew Luxton Certificate of Mailing or Transmission Honeywell International, Inc. I hereby certify that this Fee(s) Transmittal is being deposited with the United

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required) Blocks I through 5 should be completed where

101 Columbia Road P.O. Box 2245

Morristown, NJ 07962-2245

TITLE OF INVENTION:

4a. The following fee(s) are submitted: Issue Fee

Advance Order - # of Conies

States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name)

(Signature) (Date) APPLICATION NO FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO Honeywell No. 10/706,149 11/12/2003 Lakshman S. Withanawasam 6076 H0004595

360-Degree Magnetoresistive Rotary Position Sensor

APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	03/14/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
Aurora, Reena		2862	324-207250				
I Change of correspondence address or indication of "Fee Address" (37 CFR 1 363)  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached "Fee Address form indication for "Fee Address" indication form PTO/SB/12; Rev 03-02 or more recent) attached 'Use of a Customer Number is required.			2 For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		era Hulbert &	McDonnell Boehnen Hulbert & Berghoff LLP	
3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set from in 37 CFA 31 1 Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CTT' and STATE OR COUNTRY)  Morristown, N)  Morristown, N)							

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔀 Corporation or other private group entity 🔲 Government

A check is enclosed

	overpayment, to Deposit Account Number 13-2490	(enclose an extra COPY of this form
5 Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepte interest as shown by the records of the United States Patent and Trademark		
Authorized Signature /omardgalaria/	Date March 14, 2007	
Typed or printed name Omar D. Galaria	Registration No. 59,207	

Publication Fee (No small entity discount permitted)

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any

Payment by credit card. Form PTO-2038 is attached

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